## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**TEMPORARY** 

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB Number

3235-0076 February 28, 2009 Expires:

Estimated average burden hours per response ......

16.00

SEC Mail Processing Section

FEB 2 0 2009

Washington, DC

					800
Name of Offering ( check if this is an a Shares of Kingsbridge Partners, Ltd		e has changed, and	indicate change.)		
Filing Under (Check box(es) that apply): Type of Filing: New Filing	Rule 504 Amendment	Rule 505	☑ Rule 506	Section 4(6)	ULOE
	A, BAS	SIC IDENTIFICA	FION DATA		
1. Enter the information requested about	the issuer				
Name of Issuer ( check if this is an amer Kingsbridge Partners, Ltd.	ndment and name ha	as changed, and ind	icate change.)		
Address of Executive Offices c/o Ogier Fiduciary Services (Cayma 1234, South Church Street, Grand C	an) Limited, Que		PO Box (3	lephone Number (li 45) 945-6264	09003763
Address of Principal Business Operations (if different from Executive Offices)	(Number	and Street, City, Sta	ite, Zip Code) Te	lephone Number (Inclu	uding Area Code)
Brief Description of Business Private In	vestment Fund				
<del>-</del> : = :	urtnership, already for artnership, to be for		ner (please specify	): Cayman Islands	Exempted Company
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organization	on: (Enter two-l	Month Year 03 07 etter U.S. Postal Se ada; FN for other fo		FN	MAR 0 5 2009

GENERAL INSTRUCTIONS

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Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 8

## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - · Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - · Each general and managing partner of partnership issuers.

Ü	0.01						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Stuart, Tracy McHale							
Business or Residence Address 590 Madison Avenue, 31st	,		Code)				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)		-				
Anselmo, Anthony J.							
Business or Residence Adda	ess (Number an	d Street, City, State, Zip	Code)				
590 Madison Avenue, 3114	Floor, New Yo	ork, New York 10022					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Young, Peter							
Business or Residence Adda							
c/o Ogier Fiduciary Servic Islands	es (Cayman) L	imited, Queensgate Ho	use, PO Box 1234, South	Church Street	, Grand Cayman, KY1-1108, Cayman		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Young, Samuel A.D.							
Business or Residence Adda c/o Ogier Fiduciary Service Islands				Church Street	, Grand Cayman, KY1-1108, Cayman		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner		
Full Name (Last name first, Arnott, Robert P.	if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Ogier Fiduciary Services (Cayman) Limited, Queensgate House, PO Box 1234, South Church Street, Grand Cayman, KY1-1108, Cayman Islands							
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Business or Residence Add	ress (Number an	d Street, City, State, Zip	Code)				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first,	if individual)						
Business or Residence Add	rece (Number an	d Street City State Zin	Code)				

					E	B. INFOR	MATION	ABOUT	OFFERIN	(G					
1.	Has the issue	er sold, or	does the is	suer intend	to sell, to	поп-ассте	dited inve	stors in thi	s offering?			****************		Yes	No
				Answe	r also in A	ppendix, C	Column 2,	if filing un	der ULOE	Ē.				_	
<ul> <li>What is the minimum investment that will be accepted from any individual?</li> <li>* The minimum may be waived by the Board of Directors, in its sole discretion, provided that the minimum initial investment shall not be less than \$100,000.</li> </ul>									\$ <u>5,000,000*</u>						
3.	Does the off	ering perm	it joint ow	nership of	a single u	nit?			***********					Yes	No
4.	Enter the information remuneration person or age than five (5) dealer only.	n for solici ent of a br persons to	tation of poker or de be listed	ourchasers ealer regist are associ	in connectered with	tion with s the SEC as	ales of sec nd/or with	curities in a state or	the offerin states, list	g. If a pe the name	rson to be of the bro	listed is a ker or dea	n associated ler. If more	⊠	
Ful	l Name (Last r	name first,	if individu	ıal)											
Bu	siness or Resid	lence Addr	ess (Numl	er and Str	eet, City,	State, Zip (	Code)				· · · · · · · · · · · · · · · · · · ·	111			<del></del>
Na	me of Associat	ted Broker	or Dealer												
Sta	tes in Which P	erson List	ed Has So	licited or I	ntends to S	Solicit Purc	hasers			<u> </u>					
	(Check	"All State	s" or checl	c individua	al States)									🗆 A	ll States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Fu	Il Name (Last i														
Bu	siness or Resid	lence Addı	ess (Numl	ber and Str	eet, City,	State, Zip (	Code)								
Na	me of Associa	ted Broker	or Dealer			•••			<u>.                                    </u>						
Sta	tes in Which F	erson List	ed Has So	licited or I	ntends to S	Solicit Purc	chasers								
	(Check "All	States" or	check indi	ividual Sta	tes)		•••••	••••••		••••••				🗆 А	ll States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Fu	Il Name (Last	name first,	if individu	ual)									_		· · ·
Bu	siness or Resid	lence Add	ess (Num	ber and Str	reet, City,	State, Zip	Code)				_		. · ·	<del>.</del>	<u></u>
Na	me of Associa	ted Broker	or Dealer			_									
Sta	ites in Which I	Person List	ed Has So	licited or I	ntends to S	Solicit Pur	chasers		<del>,</del>		<u></u>				-
	(Check "All	States" or	check ind	ividual Sta	tes)				••••••		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************		🗆 A	Il States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	(DE) (MD) [NC) [VA)	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$		\$
	Equity	\$1,000,000,000		\$46,600,000
	☐ Common ☐ Preferred	<u> </u>		<u> </u>
	Convertible Securities (including warrants)	¢		¢
	· · · · · · · · · · · · · · · · · · ·			\$
	Limited Partnership Interests	\$		\$
	Other (Specify)	\$		\$
	Total	\$ <u>1,000,000,000</u>	_	\$ <u>46,600,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	4		\$46,600,000
	Non-accredited Investors			\$
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	_		\$
	Regulation A			\$
	Rule 504			\$
	Total		_	\$ \$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.			Ψ <u></u>
	Transfer Agent's Fees			\$
	Printing and Engraving Costs		$\boxtimes$	\$ <u>5,000</u>
	Legal Fees		$\boxtimes$	\$ <u>70,000</u>
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finder's fees separately)			
	Other Expenses (identify)			\$
	Total		$\boxtimes$	\$ <u>75,000</u>
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			\$999,925,000

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above. Payments to Officers, Directors, & Payments to Affiliates Others Salaries and fees □ \$\_\_\_\_\_ □ \$\_\_\_\_\_\_ □ \$\_\_\_\_\_ Purchase of real estate **\$\_\_\_\_** Purchase, rental or leasing and installation of machinery and equipment ...... **\$\_\_\_\_** □ \$\_\_\_\_\_ Construction or leasing of plant buildings and facilities..... Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets **□** \$\_\_\_\_ □ \$\_\_\_\_\_ of securities of another issuer pursuant to a merger)..... Repayment of indebtedness □ \$ □ \$\_\_\_\_\_ □ \$ Working capital ..... **S999,925,000** Other (specify): Investment Capital □ \$\_\_\_\_\_ Column Totals **S999,925,000 ⊠** \$999,925,000 Total Payments Listed (column totals added)..... D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)
Kingsbridge Partners, Ltd.

Name of Signer (Print or Type)
Tracy McHale Stuart

Signature

Date

2/17/09

Title of Signer (Print or Type)

Director

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)